

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE



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BY: RE

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
Grove Shannon L

1. Office, Agency, or Court

Agency Name

State Assembly

Division, Board, Department, District, if applicable

Your Position

32nd Assembly District

Assemblywoman

► If filing for multiple positions, list below or on an attachment.

Agency: _____ Position: _____

2. Jurisdiction of Office (Check at least one box)

☒ State

☐ Judge (Statewide Jurisdiction)

☐ Multi-County _____

☐ County of _____

☐ City of _____

☐ Other _____

3. Type of Statement (Check at least one box)

☒ Annual: The period covered is January 1, 2010, through December 31, 2010.

☐ Leaving Office: Date Left _____
(Check one)

The period covered is _____, through December 31, 2010.

☐ The period covered is January 1, 2010, through the date of leaving office.

☐ Assuming Office: Date _____

☐ The period covered is _____, through the date of leaving office.

☐ Candidate: Election Year _____ Office sought, if different than Part 1: _____

4. Schedule Summary

Check applicable schedules or "None."

► Total number of pages including this cover page: 9

☐ Schedule A-1 - Investments - schedule attached

☒ Schedule C - Income, Loans, & Business Positions - schedule attached

☒ Schedule A-2 - Investments - schedule attached

☒ Schedule D - Income - Gifts - schedule attached

☐ Schedule B - Real Property - schedule attached

☐ Schedule E - Income - Gifts - Travel Payments - schedule attached

-or-

☐ None - No reportable interests on any schedule

I certify under penalty of perjury under the laws of the State of California that

Date Signed 2/28/2011
(month, day, year)

Signature

SCHEDULE A-2
Investments, Income, and Assets
of Business Entities/Trusts
(Ownership Interest is 10% or Greater)

| |
|---|
| CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION |
| Name Shannon L. Grove |

► 1. BUSINESS ENTITY OR TRUST

Continental Labor & Staffing Resources, Inc.

Name
900 Mohawk Suite 120 Bakersfield, CA 93309

Address (Business Address Acceptable)

Check one

☐ Trust, go to 2 ☒ Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE

IF APPLICABLE, LIST DATE:

- ☐ \$2,000 - \$10,000
☐ \$10,001 - \$100,000
☒ \$100,001 - \$1,000,000
☐ Over \$1,000,000

____/____/10 ____/____/10
ACQUIRED DISPOSED

NATURE OF INVESTMENT

☐ Sole Proprietorship ☐ Partnership ☒ Corporation

YOUR BUSINESS POSITION CEO Other

► 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)

- ☐ \$0 - \$499 ☐ \$10,001 - \$100,000
☐ \$500 - \$1,000 ☒ OVER \$100,000
☐ \$1,001 - \$10,000

► 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)

See Attachment

► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST

Check one box:

☐ INVESTMENT ☒ REAL PROPERTY

See Attachment

Name of Business Entity or
Street Address or Assessor's Parcel Number of Real Property

Description of Business Activity or
City or Other Precise Location of Real Property

FAIR MARKET VALUE

IF APPLICABLE, LIST DATE:

- ☐ \$2,000 - \$10,000
☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000
☐ Over \$1,000,000

____/____/10 ____/____/10
ACQUIRED DISPOSED

NATURE OF INTEREST

☐ Property Ownership/Deed of Trust ☐ Stock ☐ Partnership

☐ Leasehold Yrs. remaining ☐ Other

☐ Check box if additional schedules reporting investments or real property are attached

► 1. BUSINESS ENTITY OR TRUST

Continental Safety Consulting Services

Name
900 Mohawk Suite 110 Bakersfield, CA 93309

Address (Business Address Acceptable)

Check one

☐ Trust, go to 2 ☒ Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE

IF APPLICABLE, LIST DATE:

- ☒ \$2,000 - \$10,000
☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000
☐ Over \$1,000,000

____/____/10 ____/____/10
ACQUIRED DISPOSED

NATURE OF INVESTMENT

☐ Sole Proprietorship ☐ Partnership ☒ Corporation

YOUR BUSINESS POSITION Vice President Other

► 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)

- ☐ \$0 - \$499 ☐ \$10,001 - \$100,000
☐ \$500 - \$1,000 ☐ OVER \$100,000
☒ \$1,001 - \$10,000

► 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)

None

► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST

Check one box:

☐ INVESTMENT ☒ REAL PROPERTY

See Attachment

Name of Business Entity or
Street Address or Assessor's Parcel Number of Real Property

Description of Business Activity or
City or Other Precise Location of Real Property

FAIR MARKET VALUE

IF APPLICABLE, LIST DATE:

- ☐ \$2,000 - \$10,000
☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000
☐ Over \$1,000,000

____/____/10 ____/____/10
ACQUIRED DISPOSED

NATURE OF INTEREST

☐ Property Ownership/Deed of Trust ☐ Stock ☐ Partnership

☐ Leasehold Yrs. remaining ☐ Other

☐ Check box if additional schedules reporting investments or real property are attached

Comments:

Continental Labor

Customer Name

Acme Vial
Amarillo Wind Machine
American West Construction Co.
Ausra CA, LLC
Bakersfield Memorial Hospital
BARC-Bakersfield Assoc.
Barker Management dba Villa Raseo
Big Brand Tires
Braun Electric Co. Inc.
Brown's Backhoe Service, Inc.
Cenergy Int'l
Certex-West
City of Delano
City of Wasco
Country Plastics, Inc.
Covanta Mendota, LP
DP Industries
Energy Link
Evergreen Construction, Inc.
Fortune Metal Inc.
C.G. Roxane Water Company
Gibson's Irrigation Systems
Hogg Drilling
Houchin Community Blood Bank
Jam Dairy Construction, Inc.
K.S. Fabrication & Machine
KBA Engineering, LLC
KS Industries, LP
KVS Transportation
Man Tech
Martin-Stone Ranch
McJunkin Redman Corp.
National Cement

NTS, Inc.
Oildale Tire Company, Inc.
Pacific Builders
Paramount Farms-Lost Hills
Pick Your Part
Plant Systems, Inc.
Premier Equipment Rental
Pro Tool Services, Inc.
Ray Filoteo's Welding Service
Ridgecrest Regional Hospital
Robert Heely Construction
San Joaquin Refining Co.
Searles Valley Minerals
Service Master By Benavento
Shade Comforts, Inc.
Solid Construction
Sparkle Cleaners
Star Pups Pet Salon & Paw Spa
Structures Plus, Inc.
TIC-The Industrial Company
Truitt Oilfield Maintenance Corp.
Valleywide Heating & Plumbing
Western Insulation, LP #263
Western Mechanical
Wilbur Ellis Co.
WS Packaging Group, Inc.
Zylstra Xpress Lube

Shannon L. Grove
Form 700
02/22/11

Real Property Interest Held by Business

Main Office-
900 Mohawk, Suite 120
Bakersfield, Ca. 93309

Fair Market Value- \$100,000.00-\$1,000,000.00
Nature of Interest-Leasehold 1 Year Remaining

Ridgecrest Office-

509 West Ward Avenue
Ridgecrest, Ca. 93555

Fair Market Value- Less Than \$2,000.00
Nature of Interest-Leasehold Month to Month

Paso Robles-

6251 4th Street # A
Paso, Robles, Ca. 93446

Fair Market Value-\$2,000.00-\$10,000.00
Leasehold Month to Month

Visalia-

1810 So. Central, Suite C
Visalia, Ca. 93277

Fair Market Value-\$10,000.00-\$100,000.00
Leasehold Month to Month

Rocky Mountain Division

Greeley Colorado-

7251 W. 20th St. Suite 101-A Bldg L
Greeley, Co. 80634
Nature of Interest-Leasehold 1 year

Shannon L. Grove
Form 700
02/22/11

Continental Safety Consulting

Main Office-
900 Mohawk, Suite 110
Bakersfield, Ca. 93309

Fair Market Value-Less than \$10,000.00
Nature of Interest-Leasehold Month to Month

SCHEDULE A-2
Investments, Income, and Assets
of Business Entities/Trusts
(Ownership Interest is 10% or Greater)

| |
|---|
| CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION |
| Name <u>Shannon L. Grove</u> |

▶ 1. BUSINESS ENTITY OR TRUST

Rick Grove Equipment

Name

83 Vera Fern, Bakersfield, CA 93308

Address (Business Address Acceptable)

Check one

☐ Trust, go to 2 ☒ Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

O Ring MFG

FAIR MARKET VALUE

IF APPLICABLE, LIST DATE:

- ☒ \$2,000 - \$10,000
☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000
☐ Over \$1,000,000

 / / 10 / / 10
ACQUIRED DISPOSED

NATURE OF INVESTMENT

☒ Sole Proprietorship ☐ Partnership ☐ Other

YOUR BUSINESS POSITION

▶ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)

- ☐ \$0 - \$499 ☒ \$10,001 - \$100,000
☐ \$500 - \$1,000 ☐ OVER \$100,000
☐ \$1,001 - \$10,000

▶ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)

None

▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST

Check one box:

☐ INVESTMENT ☒ REAL PROPERTY

83 Vera Fern, Bakersfield, CA 93308

Name of Business Entity or

Street Address or Assessor's Parcel Number of Real Property

Bakersfield, CA 93308

Description of Business Activity or

City or Other Precise Location of Real Property

FAIR MARKET VALUE

IF APPLICABLE, LIST DATE:

- ☐ \$2,000 - \$10,000
☐ \$10,001 - \$100,000
☒ \$100,001 - \$1,000,000
☐ Over \$1,000,000

 / / 10 / / 10
ACQUIRED DISPOSED

NATURE OF INTEREST

☒ Property Ownership/Deed of Trust ☐ Stock ☐ Partnership

☐ Leasehold Yrs. remaining ☐ Other

☐ Check box if additional schedules reporting investments or real property are attached

▶ 1. BUSINESS ENTITY OR TRUST

Name

Address (Business Address Acceptable)

Check one

☐ Trust, go to 2 ☐ Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE

IF APPLICABLE, LIST DATE:

- ☐ \$2,000 - \$10,000
☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000
☐ Over \$1,000,000

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▶ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)

▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST

Check one box:

☐ INVESTMENT ☐ REAL PROPERTY

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Street Address or Assessor's Parcel Number of Real Property

Description of Business Activity or

City or Other Precise Location of Real Property

FAIR MARKET VALUE

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☐ Over \$1,000,000

 / / 10 / / 10
ACQUIRED DISPOSED

NATURE OF INTEREST

☐ Property Ownership/Deed of Trust ☐ Stock ☐ Partnership

☐ Leasehold Yrs. remaining ☐ Other

☐ Check box if additional schedules reporting investments or real property are attached

Comments: _____

SCHEDULE C
Income, Loans, & Business
Positions
(Other than Gifts and Travel Payments)

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name

Shannon L. Grove

► **1. INCOME RECEIVED**

NAME OF SOURCE OF INCOME

KS Fabrication & Machine

ADDRESS (Business Address Acceptable)

6205 District Blvd., Bakersfield, CA 93313

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Fabrication & Machine

YOUR BUSINESS POSITION

Operations Manager

GROSS INCOME RECEIVED

- ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☒ OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

- ☐ Salary ☒ Spouse's or registered domestic partner's income
☐ Loan repayment ☐ Partnership

☐ Sale of _____
(Property, car, boat, etc.)

☐ Commission or ☐ Rental Income, list each source of \$10,000 or more

☐ Other _____
(Describe)

► **1. INCOME RECEIVED**

NAME OF SOURCE OF INCOME

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

YOUR BUSINESS POSITION

GROSS INCOME RECEIVED

- ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☐ OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

- ☐ Salary ☐ Spouse's or registered domestic partner's income
☐ Loan repayment ☐ Partnership

☐ Sale of _____
(Property, car, boat, etc.)

☐ Commission or ☐ Rental Income, list each source of \$10,000 or more

☐ Other _____
(Describe)

► **2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD**

* You are not required to report loans from commercial lending institutions, or any indebtedness created as part of a retail installment or credit card transaction, made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

HIGHEST BALANCE DURING REPORTING PERIOD

- ☐ \$500 - \$1,000
☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000
☐ OVER \$100,000

INTEREST RATE

_____ % ☐ None

TERM (Months/Years)

SECURITY FOR LOAN

- ☐ None ☐ Personal residence

☐ Real Property _____
Street address

_____ City

☐ Guarantor _____

☐ Other _____
(Describe)

Comments: _____

SCHEDULE D Income – Gifts

CALIFORNIA FORM **700**

FAIR POLITICAL PRACTICES COMMISSION

Name

Shannon L. Grove

► NAME OF SOURCE

J.B. Aguire

ADDRESS (Business Address Acceptable)

900 Mohawk Suite 220 Bakersfield, CA 93309

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Landlord

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|---------------------|------------------|------------------------|
| <u>12 / 15 / 10</u> | <u>\$ 100.00</u> | <u>Gift Card</u> |
| <u> / / </u> | <u>\$</u> | <u> </u> |
| <u> / / </u> | <u>\$</u> | <u> </u> |

► NAME OF SOURCE

John A. Perez for Assembly

ADDRESS (Business Address Acceptable)

777 S Figueroa St. Ste. 4050 Los Angeles, CA 90017

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Campaign

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|--------------------|------------------|--------------------------|
| <u>12 / 6 / 10</u> | <u>\$ 110.00</u> | <u>Leather Portfolio</u> |
| <u>12 / 6 / 10</u> | <u>\$ 5.00</u> | <u>Rubber Ducky</u> |
| <u> / / </u> | <u>\$</u> | <u> </u> |

► NAME OF SOURCE

California Republican Party

ADDRESS (Business Address Acceptable)

1215 K Street, Ste. 1220, Sacramento, 95814

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Political

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|--------------------|------------------|------------------------|
| <u>11 / 3 / 10</u> | <u>\$ 145.62</u> | <u>Rolling Bag</u> |
| <u>11 / 3 / 10</u> | <u>\$ 57.00</u> | <u>Digital Frame</u> |
| <u> / / </u> | <u>\$</u> | <u> </u> |

► NAME OF SOURCE

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|-----------------|-----------|------------------------|
| <u> / / </u> | <u>\$</u> | <u> </u> |
| <u> / / </u> | <u>\$</u> | <u> </u> |
| <u> / / </u> | <u>\$</u> | <u> </u> |

► NAME OF SOURCE

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|-----------------|-----------|------------------------|
| <u> / / </u> | <u>\$</u> | <u> </u> |
| <u> / / </u> | <u>\$</u> | <u> </u> |
| <u> / / </u> | <u>\$</u> | <u> </u> |

► NAME OF SOURCE

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|-----------------|-----------|------------------------|
| <u> / / </u> | <u>\$</u> | <u> </u> |
| <u> / / </u> | <u>\$</u> | <u> </u> |
| <u> / / </u> | <u>\$</u> | <u> </u> |

Comments: _____